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GENERAL HEADQUARTERS
SUPREME COMMANDER FOR THE ALLIED POWERS
Public Health and Welfare Section

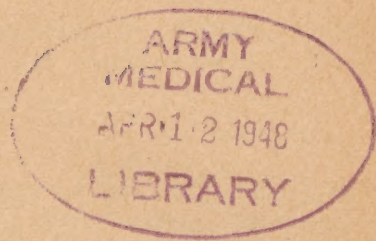
WEEKLY BULLETIN

For Period

22 March - 28 March

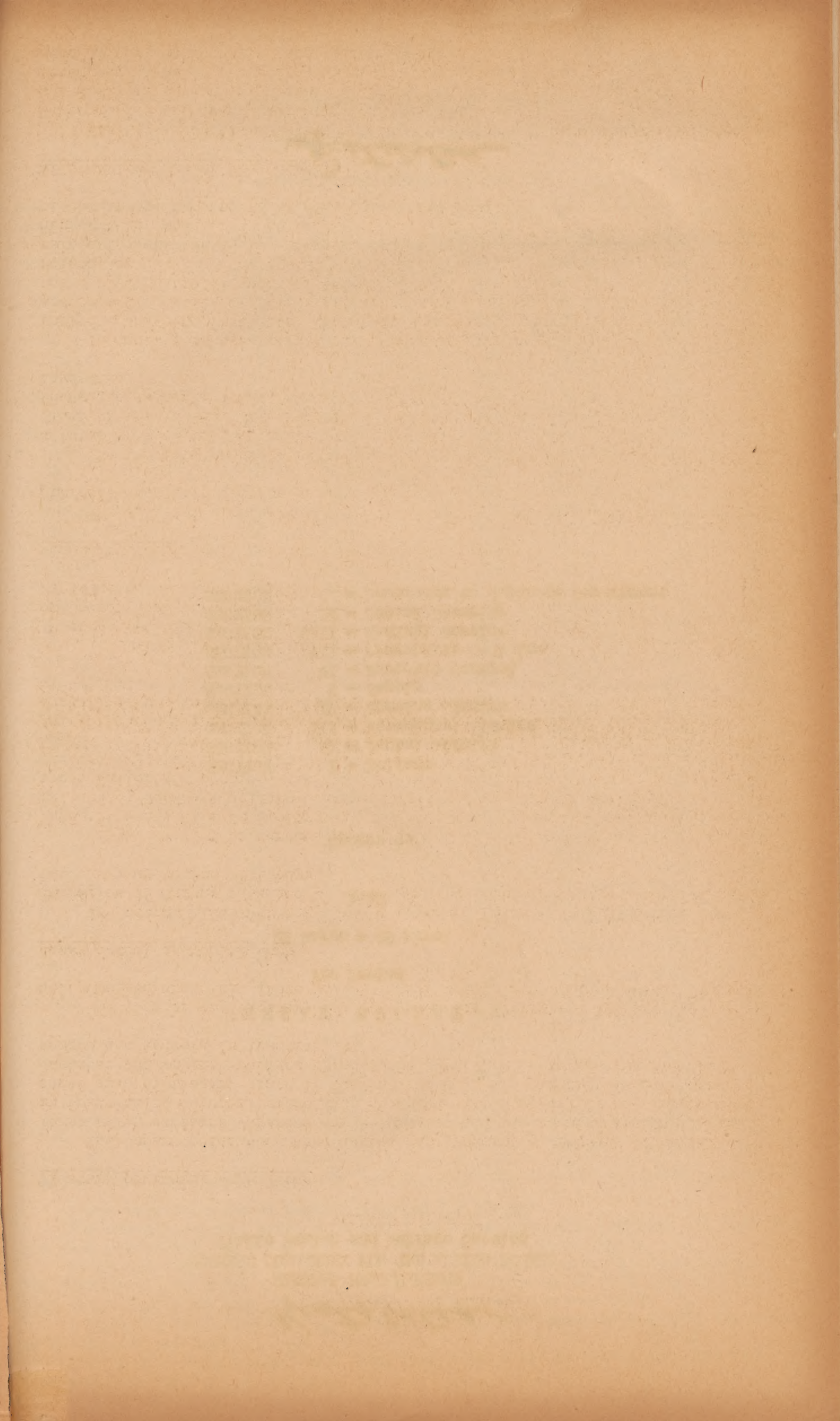
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SECTION I

WELFARE DIVISION

Glossary of Social Work Terms

The Japan Social Work Association has prepared a Glossary of Social Work Terms which contains Japanese words, phrases and titles most frequently used in translating material concerning welfare. The Glossary is not intended to serve as a dictionary since it does not contain all possible translations of Japanese and English welfare terms. The intention is to provide the most common and acceptable translation.

One copy of the Glossary for each Military Government Welfare Officer is being mailed with this issue of the Public Health and Welfare Weekly Bulletin.

Japan School of Social Work

The second class which graduated from the Japan School of Social Work, Tokyo, on 26 March, totalled 23 students, including four women, who completed the one year course of study.

Of the 23 students graduated a total of 14 have already secured employment. These students will be employed in the following places: Minsei-iin Federation (2) Tokyo; Setagaya Welfare Center, Tokyo; Social Affairs Section, Oita Prefecture; Children's Section, Aichi Prefecture; Children's Section, Kanagawa Prefecture (2); Social Affairs Section, Kanagawa Prefecture; Sanki-Ryo Zenkoji, Nagano Prefecture; Hodo-in, Saitama Prefecture; Osaka Community Chest; Dozen-Kai (Children's Institution) Tokyo; Social Work Association (Shakai Jigyo Kyokai) Tokyo; Maternal and Child Health Section, Children's Bureau, Ministry of Welfare.

The first class that graduated from the school in November 1947 included 39 students. The next term of the school will begin 16 April. The Japan School of Social Work now occupies the former Naval Museum Building located at No. 226 - 2, 3-chome, Harajuku, Shibuya-ward, Tokyo.

Community Chest (National Interdependence Campaign)

The official closing date of the Community Chest Campaign (for reporting purposes) has been set for 31 March.

The previous progress report of the Community Chest Campaign reflected a total of ¥558,260,046 raised towards the national goal of ¥683,500,000, or 81.6% of the quota. This report included "estimates" for nine prefectures (Hokkaido, Aomori, Tokyo, Kanagawa, Niigata, Ishikawa, Kyoto, Osaka and Kagoshima).

The most recent summary of the progress of the campaign, dated 20 March, includes only one "estimate" (Kanagawa Prefecture) and reflects a reasonably accurate accounting of the current status of the campaign returns based on the revised national quota of ¥678,200,000. This summary reveals ¥540,619,045 raised, or 79.7% of the quota. The differential in this amount reported as raised in relation to the previous report is the result of "estimates" being higher than actual returns in eight out of the nine prefectures that were included in the reports under "estimated" returns.

Military Government Team Reports

Monthly Activities Reports and Special Reports received from Military Government Teams frequently carry information that is of general interest to all Military Government Welfare Officers and whenever such information is received, it will be briefed, as necessary, and published in the Welfare Division of the Public Health and Welfare Section Weekly Bulletin:

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A Special Report from the Kinki Military Government Region, subject: "Community Organization", covering a resume of the Kyoto Military Government Team Monthly Activities Reports for several months, is given below because of its general content and interest.

"Citizen's Committee"

"The background and need for a Citizen's Committee grew out of the recognition that a well integrated and successful welfare program called for an informed, interested and responsive community in which, to develop and function. In order to have the public informed and responsive, it was necessary to build an organization representative of all segments of the community; a strong organization which would survive changes of personnel and the passage of time; an organization which would survive the withdrawal of occupation guidance and support; an organization which would be non-partisan and non-political; an organization which would, and could, insist on the maintenance of already established welfare standards and services; an organization not in competition with anyone for public recognition, instead an organization integrating and leading the community into an acceptance of what civic duties and responsibilities are within a democratic society."

"It was also recognized that the structure and nature of Japanese Society had militated against the development of a social conscience, against the acceptance of social and civic responsibilities. In all countries, not only Japan, community organization has always lagged behind the development for social services, whereas it should have led the way and acted as the spearhead because it had the weight of public opinion behind it. Realizing that Japan had more to overcome than the public indifference which is, in varying degrees, the norm in many countries, something was called for which would stimulate, instruct and afford leadership to the community at large. It is hoped that the interest and leadership thus developed will be the source for maintaining a critical yet constructive attitude toward all welfare programs with emphasis on the public program."

"With the foregoing in mind, it was decided to form this Citizen's Committee immediately so that it could develop with the general program for which the foundation was being laid. Contact was made with the head of the Department of Sociology of Doshisha University. With his help a comprehensive committee of representative citizens was formed. The following professions and interests are represented on the committee: teaching, social work, law, medicine, labor, YWCA, City Council, Prefectural Assembly, Diet, the press, business and industry."

"As a part of the orientation and to acquaint them with some of the pressing social problems, two full days during the summer were spent visiting institutions. The committee went in a body, and from 16 to 20 members visited eight representative prefectural, city and private institutions. These visits plus reports on welfare problems and needs convinced them of the need for such an organization. After the committee was organized and officers selected, the Team Welfare Officer retired to the position of advisor. The committee chairman has been tireless in his efforts, and has been rewarded by excellent response and support from all the committee members. Problems which the committee could understand and cope with have since then presented themselves in quick succession."

"The first problem of any size was the organization for the Community Chest. In traditional Japanese fashion it was proposed, by the group of citizens who were called together to discuss the organization of the Chest movement, that the Governor, Vice-governor, Mayor and other officials be named as officers, and chairman of the various committees and sub-committees. This was vigorously opposed by those members of the Citizen's Committee who had been asked to participate in this organizational meeting. Their insistence on an election of officers with the elimination of all officials threw the meeting into an uproar, but they carried the day. Some compromises were called for, on elections, with the result

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that the Governor was elected honorary chairman, and the Mayor elected one of the four consultants. All other officers were elected from among representative citizens with several members of the Citizen's Committee being elected to six important committees, including the significant Distribution Committee."

"The Citizen's Committee then set itself the task of making a survey of all institutions eligible to share in Community Chest funds. A questionnaire was sent to all institutions. Those institutions not responding were personally visited by a member of the committee. A compilation was made of all the facts and figures collected. This study, financed by the Citizen's Committee, will be given careful consideration by the Distribution Committee of the Community Chest, and some of their decisions were based on those recommendations presented by the Citizen's Committee."

"At a subsequent meeting one of the members summarized and commented on the new Child Welfare Law. Another member had prepared an interesting graph showing child distribution throughout the prefecture, age distribution, and other pertinent factors which will be significant in a good administration of this law. The committee then went on record as being opposed to the Governor's appointee to the head of the Child Welfare Section. This was followed up by a visit to the Governor by about 15 committee members voicing their opposition to this appointment. They were not satisfied with the reasons set forth by the Governor for supporting his appointment, and they will continue to offer opposition."

At the same time they approached the Governor about buildings in the Imperial Palace Compound which they would like to see used for a Community Center. The Governor's reaction was favorable, and even though there are other requests, he promised them full consideration."

"The newly appointed Kyoto-city, Welfare Chief was invited to attend the Citizen's Committee meetings and has attended and commented on his future plans. He was advised that the committee looked to him for an improved city welfare administration."

"Sub-committees will be named within the Citizen's Committee to further some of the many projects under consideration. One of these projects envisions a study plan for institutional personnel to be made in conjunction with welfare officials, the Social Work Association, as well as institutional staff who should be asked to contribute to such a study. Committee members will assist in instruction. A study will also be made by another of the sub-committees on ways and means to improve the standard of work done by the Minsei-iin."

"Throughout all of this the press members of the Citizen's Committee have given unlimited coverage to developments in the welfare field, news stories with welfare angles, feature stories, round table discussions, pictures, and straight factual reporting on institutional abuses and poor administration. That this coverage is reaching the public is evidenced by the many comments that reach the Military Government Team from the community at large."

"At the time the Citizen's Committee was formed it was planned to use it as the nucleus for an organization which would correspond to the Councils of Social Agencies in the United States. It was hoped before too long to expand it into such an organization. Great impetus will be given to such an organization if the buildings in the Palace compound are made available for a Community Center. This Community Center could also be a study center for all types of community welfare improvement projects. It would embrace such model projects as a nursery, kindergarten, clinic, playground and recreation facilities, children's library, lecture rooms, conference rooms, and be the center, as well, for training projects for welfare officials, Minsei-iin and institutional personnel. If this can be accomplished, then a solid foundation has been laid upon which a worthy community program can develop."

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Japanese Red Cross Society

Junior Red Cross:

The Junior Red Cross Handbook for the use of teacher personnel, which has been in preparation since the Summer of 1947 is now at press and it is expected that it will be bound and ready for distribution by the Japanese Red Cross, through the Ministry of Education, on or about 15 April.

English translations covering the text material in the Junior Red Cross Handbook have been completed for the information and guidance of Military Government personnel and are being distributed with this Bulletin (Inclosure 1).

Statistical Reports

The Ministry of Welfare reports that the following prefectures failed to send monthly statistical reports as of 27 March:

Miyagi, Ibaraki, Chiba, Nagano, Shizuoka, Mie, Shiga, Wakayama, Hiroshima, Tokushima, Fukuoka, Nagasaki and Kumamoto.

The present deadline set by the Ministry of Welfare for the receipt of "Prefectural Monthly Statistical Reports" (statistics of the previous month) is the 25th of the month. There is a tendency, on the part of many prefectures, to be consistently tardy in transmitting their monthly reports and Military Government Welfare Officers are encouraged to make every effort to impress upon prefectural welfare officials the importance of submitting their monthly reports promptly.

SECTION II

DENTAL AFFAIRS DIVISION

Election of officers for the reorganized Japan Dental Association was completed 26 March. This is the first meeting held under the provision of the new democratic constitution and by-laws.

A short course designed to train Public Health Nurses as dental hygienists for ultimate employment in Health Centers is being conducted at the Tokyo Medico-Dental College by the Ministry of Welfare.

In a recent Oral Hygiene Essay Contest conducted in Osaka and Tokyo, 230,000 school children submitted entries.

SECTION III

VETERINARY AFFAIRS DIVISION

Animal Disease Report

The following animal diseases were reported for the weekly period 20-26 March, submitted by the Ministry of Agriculture and Forestry:

<u>Prefecture</u>	<u>Disease</u>	<u>No. of Cases</u>
Saitama	Swine Plague	6
Saitama	Swine Cholera	1
Miyagi	Swine Cholera	7
Kumamoto	Swine Cholera	17

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SECTION IV

NURSING AFFAIRS DIVISION

Education

Graduation exercises for the 3-year clinical nursing course were held on 24 March, at the Model Demonstration School, Central Red Cross Hospital, Tokyo. Thirty-one St. Lukes students and 68 Red Cross students received diplomas. There were also 23 St. Lukes students who finished the fourth year (Post-Graduate) course and received certificates.

The four-month Public Health Nursing course was completed 27 March and certificates were awarded to 51 students who finished the course.

The five-month National Tuberculosis course sponsored by the National Tuberculosis Association was completed 27 March and graduation exercises were held at Toin Gakuen, with 25 nurses receiving certificates.

SECTION V

SUPPLY DIVISION

Production

The yen value of production of medical supplies, (medicines, biologicals, dental materials, dental instruments, rubber sanitary goods, medical instruments, and surgical dressings), for February, totaled ¥1,054,494,050. In comparison to the 1946 and 1947 production monthly averages attained, a general increase in medicine production is noted.

Compared to the 1946 production monthly average attained, February production of controlled medicines increased approximately 288,000,000 yen; non-controlled medicines, 300,000,000 yen; patent medicines, 250,000,000 yen; biologicals, 2,000,000 yen; dental materials, 5,000,000 yen; dental instruments, 12,000,000 yen; rubber sanitary goods, 11,000,000 yen; medical instruments, 8,000,000 yen; surgical dressings, 12,500,000 yen.

Compared to the 1947 production monthly average attained, February production of controlled medicines increased approximately 170,000,000 yen; non-controlled medicines, 218,000,000 yen; patent medicines, 187,000,000 yen; dental materials, 2,000,000 yen; dental instruments, 7,000,000 yen; rubber sanitary goods, 5,000,000 yen; medical instruments, 7,000,000 yen; surgical dressings, 9,000,000 yen. During February only biological production decreased below the 1947 monthly production average figure.

The decrease in biological production is not significant since adequate stocks of all vaccines are on hand to meet requirements and further production schedules have been established to provide necessary total amounts of vaccines to implement contemplated immunization programs. While the overall large increases in all other types of medical supplies are in part reflections of the revised increased price schedules now in effect, the increases at the same time reflect the additional quantities of coal, electricity, and manufacturing raw materials made available to the medical supply industry. As additional quantities of raw material become available, further increases in production may be expected.

Yen Value of Production of Medical Supplies & Equipment

	<u>Monthly Averages</u> <u>1946 Production</u>	<u>Monthly Averages</u> <u>1947 Production</u>	<u>February 1948</u> <u>Production</u>
Production Controlled Med.	¥ 1,734,057	¥122,575,138	¥290,471,252
Non-Controlled Medicines	59,170,511	145,154,863	363,513,917

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	Monthly Averages 1946 Production	Monthly Averages 1947 Production	February 1948 Production
Patent Medicines	¥61,168,515	¥138,329,888	¥325,794,165
Biologicals	7,746,754	22,009,946	9,282,600
Dental Instruments	2,738,162	8,915,947	15,119,439
Dental Materials	1,058,437	4,224,578	6,765,114
Rubber Sanitary Goods	-	6,756,005	11,580,262
Sanitary Materials (Surgical Dressings)	2,252,291	5,855,477	14,832,289
Medical Instruments	9,452,412	10,223,865	17,115,012
Totals	¥145,321,139	¥464,045,707	¥1,054,494,050

Production of biologicals for February totaled ¥9,282,600. While there was no production of cholera and typhus vaccines, adequate stocks are on hand. February production represents a yen value of 13,000,000 below the 1947 monthly production average figure.

Production of Biologicals - February 1948

	<u>Production</u>		<u>Stock on Hand</u>	
	<u>Crude Vaccine</u>	<u>Finished Vaccine</u>	<u>Crude Vaccine</u>	<u>Finished Vaccine</u>
Cholera	-	-	875,300 cc.	4,418,470 cc.
Typhus	-	-	-	631,647 cc.
Triple Typhoid	3,210,000 cc.	470,000 cc.	1,977,500 cc.	11,038,250 cc.
Diphtheria Tox.	1,944,200 cc.	1,550,640 cc.	5,205,600 cc.	2,675,180 cc.
Smallpox	1,530,150 doses	1,640,210 doses	15,035,850 doses	2,331,680 doses
Diphtheria Antitoxin	-	60,000 cc.	-	202,829 cc.

Production of x-ray film during February increased substantially over that production reported for January. An overall increase in all sizes of film was effected. Production of x-ray film during February totaled 28,111 square meters, this representing an increase of 5,644 square meters over the production during January of 22,467 square meters. February production of x-ray film, compared to both the 1946 and the 1947 monthly production averages, is an increase of 4,000 square meters approximately.

Production of X-Ray Film (By Sizes) - 1948

<u>Size of Film</u>	<u>Month</u>	
	<u>January</u>	<u>February</u>
2-1/2" x 3-1/2"	-	3,201 dozens
4-3/4" x 6-1/2"	934 dozens	1,158 dozens
5" x 7"	540 dozens	3,376 dozens
6-1/2" x 8-1/2"	788 dozens	5,282 dozens
8" x 10"	1,514 dozens	3,547 dozens
10" x 12"	14,386 dozens	13,111 dozens
11" x 14"	684 dozens	422 dozens
14" x 17"	1,826 dozens	2,654 dozens
Dental	-	500 dozens

Production of all types of insect and rodent control supplies and equipment during February continued satisfactorily. Adequate stocks of all types are on hand to meet all requirements. Compared to January's production, February production showed an overall increase. While Antu production remained approximately the same due to large inventory stocks presently on hand, Nekoirazu (rat poison) production was doubled, DDT duster production doubled, and all types of spraying equipment were produced in sizable quantities in accordance with the 1948 production program. Large adequate stocks of DDT dust and DDT spray are on hand.

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Production - Insect and Rodent Control Supplies and Equipment - February 1948

Antu (rat poison)	1,500 kgs.
Nekoirazu (rat poison)	3,370 kgs.
DDT Dusters	9,000 each
Sprayer, knapsack type, 3 gallon capacity	7,326 each
Sprayer, pump type, semi-automatic	3,160 each
Sprayer, hand type, 1/2 gallon capacity	3,400 each
Engine duster	27 each
10% DDT Dust distributed 1-29 February 1948	289,090 lbs.
5% DDT Spray distributed 1-29 February 1948	50,520 gallons
Typhus Vaccine distributed 1-29 February 1948	174,970 vials

The weekly report of production of DDT Duster and Spraying Equipment for mosquito and fly control programs indicates the following data for the period, 14-20 March. A total of 5,451 pieces were manufactured.

	Number On Hand 14 March	Number Manufactured 14-20 March	Total On Hand 20 March	Number Shipped 14-20 March	Balance On Hand
DDT Dusters	14,779	1,800	16,579	592	15,987
Sprayer, knapsack type, 3 gallon capacity	26,386	1,910	28,296	624	27,672
Sprayer, pump type, semi-automatic	12,244	1,030	13,274	1,074	12,200
Sprayer, hand type, 1/2 gallon capacity	11,950	700	12,650	216	12,434
Power Dusters	38	11	49	-	49
Totals	65,397	5,451	70,848	2,506	68,342

A total of 4,557,364 lbs. of 10% DDT Dust, 515,786 gallons of 5% DDT Residual Effect Spray, and 136,127 vials of Typhus Vaccine represents total stocks on hand in wholesale houses of the Ministry of Welfare as of 20 March.

Distribution

Dusting and spraying equipment for insect and rodent control distributed in the period 14-20 March totaled 2,506 pieces. The ten prefectures listed below received shipments as specified, directed by the Ministry of Welfare.

Prefecture	DDT Duster	Knapsack Sprayer	Semi-automatic Sprayer	Hand Sprayer
Aomori	0	0	300	0
Iwate	0	504	0	0
Tokyo	120	0	0	60
Chiba	288	0	0	96
Shizuoka	0	0	696	0
Aichi	180	0	0	0
Osaka	0	0	0	60
Hyogo	0	120	0	0
Saga	0	0	12	0
Kagoshima	0	0	66	0
Totals	(*) 588	624	1074	216

(*) In addition, 4 DDT dusters were taken for use by the Ministry of Welfare.

A further reduction in the number of medicines under distribution control was made possible by developments in the supply situation. Thirty-nine items were removed from control, effective upon publication of Ministry of Welfare

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Notification No. 14 in the Official Gazette dated 10 March 1948. Notification No. 14 amends Notification No. 70, dated 11 November 1947, by cancellation of 39 items of medicines, and substitution of two items of quinine derivatives in altered form. This leaves a total of 85 items of medicines remaining under control. Cotton sanitary materials and nourishments remain unchanged. Bismuth subsalicylate injection and mapharsen are both removed from control, but are to receive special consideration by public health officials to assure that adequate supplies are made available to public health clinics for venereal disease control. Listed below are the items removed from control.

Medicines Removed from Distribution Control

Acetosulfamin Injection
Alcohol, Diluted
Aminocordin (Pyridincarbonate Diethylamido-Solution)
Aminopyrine Tablets
Aspirin Tablets
Bismuth Subsalsicylate
Bismuth Subsalsicylate Injection
Calcium Chloride, Crystallized
Calcium Chloride Injection
Chiretta, Japan, Powder
Chloroform for Anesthesia
Digitalis
Digitalis Injection
Epinephrine Hydrochloride (Epirenamin)
Ether for Anesthesia
Ethyl Chloride
Hydrogen Peroxide Solution (Oxydol)
Iodine, crude
Iodine, purified
Insulin
Lobeline Hydrochloride
Lobeline Hydrochloride Injection
Mapharsen
Mercuric Chloride Disinfectant
Metigal (Thiantol)
Potassium Bromide
Procaine Hydrochloride Injection
Procaine Hydrochloride Tablets
Scopolamine Hydrobromide
Scopolia, Extract of
Silver, Colloidal
Silver, Protein
Sodium Bicarbonate Tablets
Sodium Chloride Solution, Physiological
Sulfamin Tablets
Sulfaguanidin
Sulfaguanidin Tablets
Theophylline W/Sodium Acetate (Theofirol)
Zinc Oxide Ointment

Substitutions

In place of "Quinine Iron" and "Quinine Iron Ampules" the following are substituted as items under control:

Quinine and Iron Tablets
Quinine and Iron Pills

Upon publication in the Official Gazette, dated 24 February 1948, of Ministry of Welfare Notification No 7, the new ration plan for distribution of precious metals for dental use became effective. The plan is quite similar to the ration

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plan of distribution for controlled medicines now in effect. The designated metals will be made available to authorized agencies by allocation at national and prefectural levels. Allocations may be claimed by presentation of ration coupons or certificates to the designated licensed sellers. Following is a list of the designated precious metals.

Designated Precious Metals for Dental Use

- Platinum (5-gram plate)
- Gold (5-gram plate)
- Gold leaf
- Gold-platinum alloy
- Silver (25-gram plate)
- Silver alloy for plates
- Silver alloy for casting
- Silver solder
- Silver solder for silver alloy
- Silver-tin amalgam alloy
- Nickel chrome alloy solder
- Karate metal
- Solder metal

SECTION VI

NARCOTIC CONTROL DIVISION

The training school for narcotic agents held in Tokyo from 15 to 22 March was attended by 52 narcotic agents with judicial police power. Training included classroom instruction as well as practical demonstrations in which the agents participated. Subsequent schools will be held to provide training for all the narcotic agents in Japan.

Reports have been received of pressure being placed on prefectural authorities to transfer narcotic agents who are carrying out strict enforcement of the narcotic law. Such a procedure would defeat the purpose and effectiveness of the narcotic law. Ministry of Welfare narcotic officials have been advised unjustified complaints will probably increase as illegal traffic in narcotics becomes more difficult and hazardous because of more efficient and effective enforcement.

SECTION VII

PREVENTIVE MEDICINE DIVISION

Typhoid Immunizations

As a result of questions by Military Government Health Officers concerning typhoid immunizations, a summary of past instructions and an outline of present plans and policy for the current year are as follows:

Plans made during 1947 and instructions issued by the Ministry of Welfare and Public Health and Welfare implementing those plans called for immunization of all persons (except where contra-indicated) between the ages of five and sixty years, using three inoculations of TAB vaccine at weekly intervals. Said vaccine was to be Japanese produced and assayed TAB vaccine made from the same strains as those used by the U. S. Army. Plans also called for immunization with a booster dose (1 cc) on or about 1 May each year.

Due to production difficulties sufficient vaccine was not made available by 1 June 1947 as anticipated. Vaccine did not become available until September 1947. The delay in starting the immunization program and the inefficiency of execution has resulted in a partially completed program. Approximately 35,000,000 people, or 55% have completed their immunizations as of 31 March 1948.

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Because the program has not been completed and because most of the immunizations were done during the last three months of 1947, booster doses will not be required this season for those who have been immunized with three doses of vaccine since September 1947. However, concerted efforts will be made to complete original immunizations (3 inoculations) of all persons falling within the age groups requiring immunization.

The Ministry of Welfare informed the prefectures of original plans in Prevention Bureau Instruction #302 (YO HATSU NO. 302) 31 May 1947. This plan was reemphasized in Prevention Bureau Instruction #922 (YO HATSU NO. 922) 24 November 1947. Public Health and Welfare Section outlined the plan in Weekly Bulletin #20 (for period 11-17 May 1947). Other references to the program are to be found in bulletins nos. 31, 33, 35, 37, 41, 46, 51, and 58. It is to be emphasized that immunizations are compulsory. It is expected that an immunization law, now being considered by the Japanese Government, will be enacted soon. When this bill becomes law, it will require immunization against typhoid fever as outlined above.

Excellent results have been obtained as a result of past typhoid immunizations and sanitary programs. The rates have not been reduced to a minimum however, and it is necessary that the immunization program as outlined above be completed without delay. The Ministry of Welfare has been instructed to issue the necessary instruction to the prefectures and Military Government Health Officers are urged to exercise surveillance over this program in order to insure completion as soon as possible and not later than 31 May.

Diphtheria Immunization

Health Officers are reminded that when using alum precipitate toxoid a longer interval is required between doses than when using plain fluid toxoid. An interval of at least three months is considered desirable in order to obtain maximum efficacy of the product and highest immunity levels. It is therefore recommended that toxoid, when it is received, be used entirely for first doses as long as first doses remain to be given and that the material not be held back for the administration of the second dose because of the fear that additional shipments will not arrive in time.

Venereal Disease Control

It has been reported that the Venereal Disease Control program is being hampered by the lack of legal authority to detain "street girls" in hospitals for compulsory treatment. Reference is made to regulation No. 45, "Complementary Regulation for the Venereal Disease Prevention Law", issued by Ministry of Welfare 22 November 1945, Article 4, which states: "A local governor shall be empowered to order a person in the infectious stage, whose occupation involves liability of spreading venereal disease, to be admitted to a hospital". Once a diagnosis of venereal disease is established the patient may be compelled, either under the regulation cited above or under the provision of the infectious disease law, to receive treatment until the disease is considered non-infectious.

Tuberculosis Control

Japan has been using BCG vaccine for some years, and the results of that practice are of great value. It must be remembered, however, that proper evaluation of these results requires very careful records of its use. The patient's name, dosage, date of inoculation, age of the individual, address, and the name of the physician or clinic who has given the vaccine should all be accurately recorded. While 23,000,000 or more people have been given this vaccine, the study is far from complete until all these individuals have been rechecked with tuberculin tests to determine their positive state, and revaccinated again if necessary to maintain that state. Every prefecture should make every effort to keep these records up to date and as accurate as possible. Together with this study, it is necessary that very careful records be kept of all tuberculous cases.

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and deaths, with particular attention to the age at the time of death, and with very close attention being paid to the diagnosis, and age of the patient at onset of the disease.

SECTION VIII

MEDICAL SERVICE DIVISION

Civilian Hospital Strength Report for week ending 5 March shows 3,423 hospitals with a capacity of 207,306 beds, of which 100,204 were occupied. During this same period, 298,666 out-patients were treated.

SECTION IX

SOCIAL SECURITY DIVISION

National Health Insurance - Subsidies

(Ref. Weekly Bulletin No. 64)

The Ministry of Welfare reports that national subsidies allotted to National Health Insurance associations which were active during the current fiscal year, ending 31 March, totalled ¥377,911,644. This sum was composed of the following items:

1. Clerical and other office expenses	¥171,362,724
2. Travel expenses of staff members	¥ 7,350,000
3. Public health nurses' salaries and traveling expenses	¥ 39,600,000
4. Salaries for insurance doctors engaged on a part-time contractual basis	¥ 18,400,000
5. Publicity expenses	¥ 7,000,000
6. Construction of clinics and hospitals	¥123,600,000
7. Special subsidies to associations struck by disaster (mainly flood and fire)	¥ 10,000,000

The total number of associations subsidized has been reported as 7,276, covering an estimated 29,000,000 insured.

In addition to these subsidies to individual associations, the prefectural federations of National Health Insurance association (one in each prefecture) received a national subsidy totalling ¥598,920 to pay for one-half their personnel cost, mainly to enable them to attend to their functions of inspecting and tendering advice to the individual associations.

Request for subsidies to be given in the next fiscal year, beginning 1 April, have been roughly tripled in amount in an effort not only to stem but to reverse the downward trend in National Health Insurance. It is expected that, by virtue of an intensified clinics construction program, the number of active associations will be increased by about 1,000, bringing their number approximately to 8,000 with an estimated 32,000,000 insured. At present these subsidy requests are undergoing scrutiny by the Finance Ministry. To date 40 prefectures have submitted their National Health Insurance associations' requirements for clinics to be established in the 1948 fiscal year. A complete report for the entire country depends on the associations' applications being forwarded to the Ministry of Welfare or before 31 April. From the reports received a subsidy is necessary for a total of 874 clinics, which would increase the total number of associations with clinics to 2,562.

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The total number of operating associations in the country is recorded as 7,276 out of a total of 10,349 cities, towns, and villages which at one time had a National Health Insurance association. However, a recent survey by the National Health Insurance Section in the Ministry has revealed that in 40 prefectures 1,230 towns or villages do not have a doctor and 2,077 are lacking minimum medical facilities and personnel. Recent petitions addressed to the National Government from various sections of the country in support of National Health Insurance have emphasized the need for subsidies in the establishment of clinics, both by national and prefectural governments, and also for an extensive information and education program as to the value and need for social insurance. There appears to be considerable sentiment in favor of uniform contributions and medical care fees.

SECTION A

MEMORANDA TO JAPANESE GOVERNMENT

None.

Crawford F. Sams
CRAWFORD F. SAMS
Colonel, Medical Corps
Chief

- 2 Incls: 1. Handbook on Japanese Junior Red Cross Organization in Schools in Japan.
2. Weekly Report of Cases and Deaths from Communicable Disease in Japan - Week Ending 20 March 1948.

Restricted

Inclosure No. 1 missing

FIGEST OF WEEKLY REPORT OF COMMUNICABLE DISEASES IN JAPAN
FOR THE WEEK ENDED 20 MARCH 1948

There were 12,415 cases of communicable disease reported for the twelfth week, ended 20 March, compared with 12,560 in the previous week. Six prefectures (compared with four last week) failed to submit reports on the 12 acute communicable diseases. These prefectures were Hokkaido, Ishikawa, Mie, Yamaguchi, Tokushima and Oita. Seven prefectures (compared with six last week) did not report on five additional diseases: tuberculosis, pneumonia, measles, whooping cough and influenza. These prefectures were Hokkaido, Miyagi, Ishikawa, Mie, Okayama, Oita and Kagoshima.

Nearly 95 percent of all cases reported for the seventeen diseases covered by this report were due to tuberculosis (5,942) pneumonia (3,862), measles (1,247), whooping cough (665) and influenza (74). Increases were recorded for pneumonia, whooping cough and influenza. The total number of cases reported for tuberculosis and measles declined, but a review of the prefectural reports for the past two weeks indicates that complete reports would probably have shown increases in the incidence of these diseases also. The current and cumulative case rates per 100,000 population on an annual basis for each of these diseases were: tuberculosis, 397.8 and 357.7; pneumonia, 258.6 and 262.2; measles, 83.5 and 60.6; whooping cough, 40.5 and 50.0; and influenza, 5.0 and 6.2.

The remaining 12 acute communicable diseases accounted for 685 cases and 74 deaths compared with 746 cases and 74 deaths in the preceding week.

There were 325 cases and 41 deaths reported for diphtheria compared with 386 cases and 29 deaths previously. This was the second consecutive week for which a decrease was recorded, but it should be noted that the reductions in cases would not have been as great if all prefectural reports had been received. The current figure was less than half the number in the twelfth week of 1947 (680) and about a third of the corresponding figure for 1946 (926). The current and cumulative case rates were 21.8 and 27.0 respectively. Corresponding death rates were 2.7 and 3.0.

Dysentery increased approximately 25 percent from 57 to 71 cases currently. Deaths (12) remained the same. Most of the increase in cases occurred in Iwate Prefecture where 20 cases were reported this week compared with 2 previously. The current total was 20 percent higher than in the same week of 1947 (59) but 32 percent less than in the corresponding period of 1946 (105). The current and cumulative case rates were 4.8 and 3.0 respectively. Corresponding death rates were 0.8 and 0.6.

There was a 20 percent increase recorded for typhoid fever cases, from 88 to 106 currently. The number of deaths rose from 11 to 14. Most of the increase occurred in one prefecture, Fukui, where 37 cases were reported currently compared with only 3 last week. However, in the corresponding week of 1947 the total cases (135) were 27 percent higher than currently and in the same period of 1946 they were nearly 9 times as great (949).

The number of reported paratyphoid fever cases decreased 50 percent, from 40 to 20 while deaths remained the same as previously (1). It is recognized that if all prefectural reports had been received, this week's total would have been somewhat higher. Cases in the twelfth week of 1947 (63) were three times the current number and in 1946, they (100) were 5 times this week's figure. The current and cumulative case rates were 1.3 and 2.2 respectively. Both the current and cumulative death rates were 0.1.

There were no cases of smallpox this week and no smallpox deaths have been reported this year. It should be noted that the 3 cases of smallpox reported in Nagano last week were incorrectly diagnosed, bringing the total down to 5. No further report has as yet been received on the 4 cases reported in Gifu. Thirteen cases were reported in the twelfth week of 1947 and 1,318 were recorded in the corresponding period of the epidemic year 1946. The cumulative case rate through 20 March 1948 was 0.1.

Typhus fever was reported in eight prefectures. There were 17 cases currently compared with 12 in the preceding week. No deaths were reported in either week. The current figure was about the same as in the same period of 1947 (15) but only a fraction of the number (1,997) in the epidemic year of 1946. The current and cumulative case rates were 1.1 and 1.2 respectively. The cumulative death rate was 0.1.

The current number of malaria cases (58) was more than 20 persons higher than previously (48). It should be noted, however, that 22 prefectural reports were not included in last week's figure compared with 6 this week, due to failure of the prefectures to submit reports for this disease. Had all prefectures been included in both totals, the increase would have been relatively small. Last year more than three and a half times the current number was reported in the twelfth week (211).

Scarlet fever cases declined more than 25 percent. There were 27 cases and 1 death reported currently compared with 38 cases and no deaths last week. From 1 to 4 cases were reported in 17 prefectures. This week's total was only 60 percent of the number reported in the same week last year (46) and less than half the corresponding figure in 1946 (56). The current and cumulative case rates were 1.8 and 3.1. The current death rate was 0.1 and the cumulative death rate was less than 0.1.

For the first time in five weeks, a decrease was recorded for epidemic meningitis. There were 61 cases and 5 deaths this week compared with 69 cases and 19 deaths last week. Although the national total declined, this was not true of all prefectures. Fourteen prefectures registered decreases while 11 reported increases. Five of the latter are neighbouring prefectures in northern Honshu - Fukushima, Miyagi, Yamagata, Akita and Aomori - but only Fukushima and Miyagi reported increases of more than 2 cases. The current total was less than half the number (135) in the corresponding week of 1947 but was 45 percent higher than in the same week of 1946 (42). The current and cumulative case rates were 4.1 and 2.9 respectively. Corresponding death rates were 0.3 and 0.7.

There continued to be no suspect Japanese "B" encephalitis, cholera or plague.

The current and cumulative number of cases of syphilis were 4,810 and 46,597 respectively; for gonorrhea, 5,201 and 51,596; and for chancroid, 1,048 and 10,137. Only gonorrhea showed an increase over the preceding week, but all three diseases were higher than in the corresponding week of 1947 when there were reported 2,265 cases of syphilis, 3,168 cases of gonorrhea and 713 cases of chancroid. The current and cumulative case rate for these diseases were: syphilis, 322.1 and 260.0 respectively; gonorrhea, 348.2 and 287.9; chancroid, 70.2 and 56.6.

SUMMARY REPORT OF CASES AND DEATHS FROM
COMMUNICABLE DISEASES IN JAPAN

Week Ended 20 March 1948

PREFECTURE	DIPHTHERIA				DYSENTERY			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	NR	NR	*373	59	NR	NR	34	4
AOMORI	5	1	*69	7	1	-	2	-
IWATE	12	2	106	15	20	-	26	3
MIYAGI	7	1	110	5	1	-	10	-
AKITA	16	1	186	12	2	-	10	1
YAMAGATA	5	2	66	9	8	-	22	1
FUKUSHIMA	9	-	46	3	-	-	4	-
IBARAKI	9	1	90	5	-	-	9	5
TOCHIGI	7	-	115	12	-	2	10	3
GUMMA	9	3	*101	*19	4	2	*17	3
SAITAMA	8	1	111	8	-	-	5	1
CHIBA	2	1	46	1	4	-	10	1
TOKYO	27	8	324	50	13	3	84	23
KANAGAWA	13	-	130	13	3	1	18	7
NIIGATA	9	2	207	24	1	-	92	4
TOYAMA	3	-	*31	*8	-	-	2	-
ISHIKAWA	NR	NR	90	11	NR	NR	1	-
FUKUI	2	-	28	6	-	-	1	-
YAMANASHI	1	-	19	-	-	-	3	-
NAGANO	10	1	136	5	-	-	9	1
GIFU	1	-	32	5	1	-	5	-
SHIZUOKA	9	2	76	13	2	2	9	4
AICHI	10	3	160	17	1	-	16	4
MIE	NR	NR	67	7	NR	NR	4	-
SHIGA	1	-	27	1	-	-	2	-
KYOTO	5	2	77	12	-	-	16	5
OSAKA	7	2	88	10	4	-	21	3
HYOGO	13	3	133	20	1	-	13	-
NARA	-	-	25	2	1	-	1	-
WAKAYAMA	3	-	31	3	-	-	4	3
TOTTORI	-	-	25	2	-	-	2	1
SHIMANE	2	-	90	*11	1	1	1	1
OKAYAMA	7	2	*79	*11	-	-	3	*-
HIROSHIMA	12	-	138	4	1	-	10	-
YAMAGUCHI	NR	NR	*84	1	NR	NR	*5	2
TOKUSHIMA	NR	NR	24	4	NR	NR	-	-
KAGAWA	2	1	37	6	-	-	6	1
EHIME	15	-	151	21	1	-	8	4
KOCHI	1	-	56	4	-	-	1	-
FUKUOKA	21	-	275	23	-	-	19	4
SAGA	35	2	221	13	-	-	3	3
NAGASAKI	9	-	155	*25	1	1	9	2
KUMAMOTO	3	-	50	3	-	-	2	-
OITA	NR	NR	125	22	NR	NR	3	12
MIYAZAKI	5	-	*109	9	-	-	*6	2
KAGOSHIMA	10	-	117	*11	-	-	3	-
TOTAL	325	41	*4836	*532	71	12	*541	*108
RATE								
Current	21.8	2.7	27.0	3.0	4.8	0.8	3.0	0.6
Previous	25.8	1.9			3.8	0.8		

See footnotes at end of table.

Weekly Report - 20 March 1948
Continued

PREFECTURE	TYPHOID				PARATYPHOID			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	NR	NR	34	3	NR	NR	13	1
AOMORI	2	-	16	1	-	-	1	1
IWATE	-	-	7	-	-	-	2	1
MIYAGI	1	1	17	1	-	-	9	-
AKITA	-	-	2	-	-	-	-	-
YAMAGATA	1	-	8	1	-	-	1	-
FUKUSHIMA	1	-	27	4	-	-	4	1
IBARAKI	-	1	34	7	2	-	9	-
TOCHIGI	1	-	14	2	-	-	6	-
GUMMA	3	1	19	3	-	-	7	-
SAITAMA	2	-	34	4	-	-	5	1
CHIBA	-	2	44	3	1	-	6	-
TOKYO	12	-	190	24	8	1	118	3
KANAGAWA	6	1	81	12	1	-	31	-
NIIGATA	4	1	44	5	2	-	17	1
TOYAMA	-	-	*14	1	-	-	2	1
ISHIKAWA	NR	NR	5	1	NR	NR	3	-
FUKUI	37	-	50	1	-	-	1	-
YAMANASHI	-	-	4	-	-	-	8	3
NAGANO	3	1	*12	1	-	-	3	-
GIFU	3	-	69	6	-	-	14	-
SHIZUOKA	2	1	56	5	2	-	17	1
AICHI	4	3	40	4	-	-	15	-
MIE	NR	NR	47	3	NR	NR	19	-
SHIGA	-	-	3	1	-	-	3	-
KYOTO	-	-	25	5	-	-	8	1
OSAKA	5	-	40	8	-	-	*7	-
HYOGO	1	-	46	12	-	-	1	-
NARA	-	-	6	1	-	-	-	-
WAKAYAMA	4	-	30	2	-	-	-	-
TOTTORI	-	-	9	1	2	-	4	1
SHIMANE	3	-	19	1	-	-	2	-
OKAYAMA	-	-	17	1	-	-	2	-
HIROSHIMA	1	1	31	4	1	-	8	-
YAMAGUCHI	NR	NR	3	1	NR	NR	4	1
TOKUSHIMA	NR	NR	*11	2	NR	NR	1	-
KAGAWA	2	-	14	6	-	-	6	1
EHIME	1	1	20	3	-	-	7	-
KOCHI	-	-	19	5	-	-	6	-
FUKUOKA	5	-	50	6	1	-	12	-
SAGA	-	-	4	-	-	-	1	1
NAGASAKI	1	-	20	*4	-	-	1	-
KUMAMOTO	1	-	5	-	-	-	3	1
OITA	NR	NR	11	2	NR	NR	2	-
MIYAZAKI	-	-	*15	1	-	-	3	-
KAGOSHIMA	-	-	2	1	-	-	-	-
TOTAL	106	14	*1268	*159	20	1	*392	20
RATE								
Current	7.1	0.9	7.1	0.9	1.3	0.1	2.2	0.1
Previous	5.9	0.7			2.7	0.1		

See footnotes at end of table.

Weekly Report - 20 March 1948
Continued

PREFECTURE	SMALLPOX				TYPHUS FEVER			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	NR	NR	5	-	NR	NR	8	3
AOMORI	-	-	-	-	-	-	21	1
IWATE	-	-	-	-	-	-	1	1
MIYAGI	-	-	-	-	-	-	-	-
AKITA	-	-	-	-	1	-	1	-
YAMAGATA	-	-	-	-	1	-	4	1
FUKUSHIMA	-	-	-	-	-	-	-	-
IBARAKI	-	-	-	-	-	-	-	-
TOCHIGI	-	-	-	-	-	-	-	-
GUMMA	-	-	-	-	-	-	-	-
SAITAMA	-	-	-	-	-	-	3	-
CHIBA	-	-	-	-	-	-	2	-
TOKYO	-	-	1	-	8	-	67	2
KANAGAWA	-	-	-	-	1	-	14	2
NIIGATA	-	-	-	-	-	-	1	-
TOYAMA	-	-	-	-	1	-	5	-
ISHIKAWA	NR	NR	-	-	NR	NR	1	-
FUKUI	-	-	-	-	-	-	-	-
YAMANASHI	-	-	-	-	-	-	-	-
NAGANO	-	-	*	-	-	-	1	-
GIFU	-	-	4	-	1	-	17	1
SHIZUOKA	-	-	-	-	-	-	-	-
AICHI	-	-	-	-	-	-	1	-
MIE	NR	NR	-	-	NR	NR	-	-
SHIGA	-	-	-	-	-	-	1	-
KYOTO	-	-	-	-	-	-	-	-
OSAKA	-	-	-	-	3	-	*32	2
HYOGO	-	-	-	-	-	-	2	1
NARA	-	-	-	-	1	-	4	-
WAKAYAMA	-	-	-	-	-	-	-	-
TOTTORI	-	-	-	-	-	-	-	-
SHIMANE	-	-	-	-	-	-	6	1
OKAYAMA	-	-	1	-	-	-	*	-
HIROSHIMA	-	-	-	-	-	-	6	-
YAMAGUCHI	NR	NR	-	-	NR	NR	-	-
TOKUSHIMA	NR	NR	-	-	NR	NR	-	-
KAGAWA	-	-	-	-	-	-	2	-
EHIME	-	-	-	-	-	-	-	-
KOCHI	-	-	-	-	-	-	-	-
FUKUOKA	-	-	-	-	-	-	4	1
SAGA	-	-	-	-	-	-	-	-
NAGASAKI	-	-	-	-	-	-	14	2
KUMAMOTO	-	-	-	-	-	-	3	-
OITA	NR	NR	-	-	NR	NR	-	-
MIYAZAKI	-	-	-	-	-	-	-	-
KAGOSHIMA	-	-	-	-	-	-	-	-
TOTAL	-	-	*11	-	17	-	221	18
RATE								
Current	-	-	0.1	-	1.1	-	1.2	0.1
Previous	0.5	-			0.3	-		

See footnotes at end of table.

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Continued

PREFECTURE	MALARIA				CHOLERA			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	NR	NR	20	-	NR	NR	-	-
AOMORI	-	-	7	-	-	-	-	-
IWATE	-	-	9	*1	-	-	-	-
MIYAGI	NR	NR	7	-	-	-	-	-
AKITA	1	-	6	-	-	-	-	-
YAMAGATA	-	-	*2	-	-	-	-	-
FUKUSHIMA	-	-	7	-	-	-	-	-
IBARAKI	-	-	16	-	-	-	-	-
TOCHIGI	2	-	9	-	-	-	-	-
GUMMA	1	-	*7	-	-	-	-	-
SAITAMA	-	-	8	-	-	-	-	-
CHIBA	-	-	7	-	-	-	-	-
TOKYO	6	-	54	-	-	-	-	-
KANAGAWA	2	-	33	-	-	-	-	-
NIIGATA	4	-	*18	-	-	-	-	-
TOYAMA	1	-	*10	-	-	-	-	-
ISHIKAWA	NR	NR	7	-	NR	NR	-	-
FUKUI	-	-	-	-	-	-	-	-
YAMANASHI	1	-	3	-	-	-	-	-
NAGANO	-	-	1	-	-	-	-	-
GIFU	-	-	11	-	-	-	-	-
SHIZUOKA	4	-	15	-	-	-	-	-
AICHI	1	-	10	-	-	-	-	-
MIE	NR	NR	11	-	NR	NR	-	-
SHIGA	2	-	18	-	-	-	-	-
KYOTO	-	-	8	-	-	-	-	-
OSAKA	5	-	18	-	-	-	-	-
HYOGO	3	-	21	-	-	-	-	-
NARA	1	-	8	-	-	-	-	-
WAKAYAMA	-	-	9	-	-	-	-	-
TOTTORI	2	-	15	1	-	-	-	-
SHIMANE	4	-	10	-	-	-	-	-
OKAYAMA	-	-	*8	-	-	-	-	-
HIROSHIMA	1	-	14	-	-	-	-	-
YAMAGUCHI	3	-	32	-	NR	NR	-	-
TOKUSHIMA	1	-	*8	-	NR	NR	-	-
KAGAWA	1	-	10	-	-	-	-	-
EHIME	3	-	37	2	-	-	-	-
KOCHI	2	-	10	-	-	-	-	-
FUKUOKA	5	-	82	-	-	-	-	-
SAGA	-	-	11	-	-	-	-	-
NAGASAKI	1	-	14	-	-	-	-	-
KUMAMOTO	1	-	14	1	-	-	-	-
OITA	NR	NR	26	-	NR	NR	-	-
MIZAKI	-	-	4	-	-	-	-	-
KAGOSHIMA	NR	NR	12	-	-	-	-	-
TOTAL	58	-	*667	*5	-	-	-	-
RATE								
Current	3.9	-	3.7	0.0	-	-	-	-
Previous	3.2	0.1						

See footnotes at end of table.

Weekly Report - 20 March 1948
Continued

PREFECTURE	MEASLES		WHOOPI NG COUGH		TUBERCULOSIS	
	Current Cases	Cumulative Cases	Current Cases	Cumulative Cases	Current Cases	Cumulative Cases
HOKKAIDO	NR	355	NR	491	NR	4945
AOMORI	8	114	8	*146	107	*1060
IWATE	27	289	12	219	225	1966
MIYAGI	NR	345	NR	192	NR	1163
AKITA	2	83	42	202	145	1336
YAMAGATA	2	*50	9	*86	72	*935
FUKUSHIMA	19	88	16	214	209	1304
IBARAKI	17	148	9	147	75	925
TOCHIGI	1	95	32	261	94	868
GUMMA	20	80	13	236	34	667
SAITAMA	1	15	8	145	105	954
CHIBA	3	4	6	85	56	835
TOKYO	18	106	63	565	832	6134
KANAGAWA	1	21	18	441	319	2884
NIIGATA	30	184	61	440	264	1848
TOYAMA	8	*179	34	*439	119	*1273
ISHIKAWA	NR	54	NR	215	NR	1107
FUKUI	7	200	3	76	46	*357
YAMANASHI	-	14	2	94	18	423
NAGANO	41	277	13	270	132	1694
GIFU	76	497	12	102	90	1001
SHIZUOKA	44	183	11	165	114	1470
AICHI	6	131	4	131	293	2246
MIE	NR	*301	NR	*149	NR	*666
SHIGA	56	172	11	117	62	515
KYOTO	13	123	5	105	136	1294
OSAKA	19	85	9	87	311	3129
HYOGO	21	141	14	85	144	1251
NARA	-	2	-	7	34	373
WAKAYAMA	10	64	6	82	61	517
TOTTORI	29	232	1	28	71	770
SHIMANE	5	58	24	303	155	1316
OKAYAMA	NR	*346	NR	*189	NR	*775
HIROSHIMA	119	792	51	239	350	2518
YAMAGUCHI	13	123	2	88	59	751
TSUKUSHIMA	-	342	-	61	67	*687
KAGAWA	122	*730	10	58	51	511
EHIME	224	1512	26	231	179	2178
KOCHI	172	1141	8	110	64	641
FUKUOKA	14	173	39	769	498	4253
SAGA	7	61	12	213	67	786
NAGASAKI	9	165	3	196	87	1124
KUMAMOTO	28	185	3	157	114	699
OITA	NR	61	NR	115	NR	684
MIYAZAKI	55	*216	5	*37	83	*703
KAGOSHIMA	NR	*332	NR	*178	NR	*581
TOTAL	1247	*10869	605	*8966	5942	*64117
RATE						
Current	83.5	60.6	40.5	50.0	397.8	357.7
Previous	85.4		36.0		411.6	349.4

See footnotes at end of table.

Weekly Report - 20 March 1948
Continued

PREFECTURE	SCARLET FEVER				EPIDEMIC MENINGITIS				JAP. B. ENCEPHALITIS (SUSPECTS)			
	Current		Cumulative		Current		Cumulative		Current		Cumulative	
	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)
HOKKAIDO	NR	NR	152	-	NR	NR	50	8	NR	NR	-	-
AOMORI	-	-	*4	-	2	-	*11	3	-	-	-	-
IWATE	-	-	4	-	-	-	8	-	-	-	-	-
MIYAGI	1	-	13	-	8	-	24	2	-	-	-	-
AKITA	-	-	3	-	4	-	18	1	-	-	-	-
YAMAGATA	-	-	6	-	2	-	8	1	-	-	-	-
FUKUSHIMA	2	-	5	-	11	-	26	2	-	-	-	-
IBARAKI	1	-	9	-	1	-	21	4	-	-	-	-
TOCHIGI	1	-	6	-	-	-	3	-	-	-	-	-
GUMMA	2	-	*13	-	1	-	*7	3	-	-	-	-
SAITAMA	2	-	9	-	1	-	5	1	-	-	-	-
CHIBA	-	-	1	-	-	-	1	-	-	-	-	-
TOKYO	4	-	101	2	17	4	135	36	-	-	-	-
KANAGAWA	-	-	21	1	5	-	37	5	-	-	-	-
NIIGATA	-	-	2	-	-	-	9	4	-	-	-	-
TOYAMA	-	-	3	-	1	-	*6	*4	-	-	-	-
ISHIKAWA	NR	N R	-	-	NR	NR	3	2	NR	NR	-	-
FUKUI	-	-	-	-	-	-	1	-	-	-	-	-
YAMANASHI	-	-	5	-	-	-	5	1	-	-	-	-
NAGANO	1	-	17	-	1	-	10	2	-	-	-	-
GIFU	1	-	5	-	-	-	3	-	-	-	-	-
SHIZUOKA	-	-	12	1	1	-	14	2	-	-	-	-
AICHI	3	-	48	-	-	-	8	1	-	-	-	-
MIE	NR	NR	8	-	NR	NR	-	-	NR	NR	-	-
SHIGA	-	-	8	-	-	-	1	1	-	-	-	-
KYOTO	1	-	14	-	-	-	10	4	-	-	-	-
OSAKA	1	-	21	-	1	-	13	2	-	-	-	-
HYOGO	-	1	10	1	1	1	10	5	-	-	-	-
NARA	-	-	-	-	-	-	2	1	-	-	-	-
WAKAYAMA	1	-	4	1	1	-	3	-	-	-	-	-
TOTTORI	-	-	-	-	1	-	9	4	-	-	-	-
SHIMANE	-	-	2	-	1	-	2	-	-	-	-	-
OKAYAMA	-	-	5	-	-	-	4	2	-	-	-	-
HIROSHIMA	-	-	8	-	-	-	3	1	-	-	-	-
YAMAGUCHI	NR	NR	2	-	N R	NR	*3	-	NR	NR	-	-
TOKUSHIMA	NR	NR	2	-	NR	NR	1	-	NR	N R	-	-
KAGAWA	-	-	2	-	-	-	1	-	-	-	-	-
EHIME	2	-	7	-	-	-	7	2	-	-	-	-
KOCHI	2	-	8	-	-	-	4	1	-	-	-	-
FUKUOKA	-	-	8	1	-	-	12	5	-	-	-	-
SAGA	-	-	1	-	-	-	2	-	-	-	-	-
NAGASAKI	1	-	4	-	-	-	5	1	-	-	-	-
KUMAMOTO	-	-	1	-	-	-	11	5	-	-	-	-
OITA	N R	NR	2	-	NR	NR	1	-	NR	NR	-	-
MIYAZAKI	1	-	2	-	-	-	1	-	-	-	-	-
KAGOSHIMA	-	-	3	-	1	-	9	2	-	-	-	-
TOTAL	27	1	*561	7	61	5	*527	*118	-	-	-	-
RATE												
Current	1.8	0.1	3.1	0.0	4.1	0.3	2.9	0.7	-	-	-	-
Previous	2.5	-	-	-	4.6	1.3	-	-	-	-	-	-

See footnotes at end of table.

NUMBER OF CASES AND DEATHS OF COMMUNICABLE DISEASES
FOR COMPARABLE PERIOD, 1946, 1947 and 1948

Diseases	Week Ended			Cumulative Number for		
	20 Mar 1948	22 Mar 1947	23 Mar 1946	First 12 Weeks		
Cases	1948	1947	1946	1948	1947	1946
Diphtheria	325	680	926	4836	8343	15439
Dysentery	71	59	105	541	733	563
Typhoid	106	135	949	1268	2572	9236
Paratyphoid	20	63	100	392	576	1107
Smallpox	-	13	1318	11	168	9434
Typhus Fever	17	15	1997	221	486	10254
Malaria	58	211	NA	667	1992	NA
Cholera	-	-	-	-	-	-
Scarlet Fever	27	46	56	561	529	389
Epidemic Meningitis	61	135	42	527	931	348
Jap B. Encephalitis	-	-	NA	-	1	NA
(Suspects)						
Plague	-	-	-	-	-	-
Deaths						
Diphtheria	41	46	88	532	844	1654
Dysentery	12	16	44	108	169	258
Typhoid	14	23	110	159	339	1345
Paratyphoid	1	2	5	20	35	62
Smallpox	-	2	160	-	18	1053
Typhus Fever	-	-	154	18	34	674
Malaria	-	1	NA	5	9	NA
Cholera	-	-	-	-	-	-
Scarlet Fever	1	1	5	7	13	39
Epidemic Meningitis	5	31	6	118	243	79
Jap B. Encephalitis	-	-	NA	-	2	NA
(Suspects)						
Plague	-	-	-	-	-	-

CASE AND DEATH RATES OF COMMUNICABLE DISEASES
FOR COMPARABLE PERIODS, 1946, 1947 and 1948

Diseases	Week Ended			Cumulative Rates		
	20 Mar	22 Mar	23 Mar	for First 12 Weeks		
	1948	1947	1946	1948	1947	1946
Case Rate						
Diphtheria	21.8	45.5	64.1	27.0	46.5	89.1
Dysentery	4.8	3.9	7.3	3.0	4.1	3.2
Typhoid	7.1	9.0	65.7	7.1	14.3	53.3
Paratyphoid	1.3	4.2	6.9	2.2	3.2	6.4
Smallpox	-	0.9	91.3	0.1	0.9	54.4
Typhus Fever	1.1	1.0	138.3	1.2	2.7	59.2
Malaria	3.9	14.1	NA	3.7	11.1	NA
Cholera	-	-	-	-	-	-
Scarlet Fever	1.8	3.1	3.9	3.1	2.9	2.2
Epidemic Meningitis	4.1	9.0	2.9	2.9	5.2	2.0
Jap B. Encephalitis	-	-	NA	-	0.0	NA
(Suspects)						
Plague	-	-	-	-	-	-
Death Rate						
Diphtheria	2.7	3.1	6.1	3.0	4.7	9.5
Dysentery	0.8	1.1	3.0	0.6	0.9	1.5
Typhoid	0.9	1.5	7.6	0.9	1.9	7.8
Paratyphoid	0.1	0.1	0.3	0.1	0.2	0.4
Smallpox	-	0.1	11.1	-	0.1	6.1
Typhus Fever	-	-	10.7	0.1	0.2	3.9
Malaria	-	0.1	NA	0.0	0.1	NA
Cholera	-	-	-	-	-	-
Scarlet Fever	0.1	0.1	0.3	0.0	0.1	0.2
Epidemic Meningitis	0.3	2.1	0.4	0.7	1.4	0.5
Jap. B. Encephalitis	-	-	NA	-	0.0	NA
(Suspects)						
Plague	-	-	-	-	-	-

See footnotes at end of table

Weekly Report - 20 March 1948
Continued

PREFECTURE	PNEUMONIA		INFLUENZA	
	Current Cases	Cumulative Cases	Current Cases	Cumulative Cases
HOKKAIDO	NR	2991	NR	*65
AOMORI	86	*716	-	8
IWATE	83	721	-	2
MIYAGI	NR	996	NR	2
AKITA	109	678	-	-
YAMAGATA	49	*446	-	-
FUKUSHIMA	134	1216	-	1
IBARAKI	144	1912	-	-
TOCHIGI	89	381	25	31
GUMMA	82	975	1	15
SAITAMA	107	882	1	38
CHIBA	39	472	-	-
TOKYO	353	2497	9	53
KANAGAWA	140	1744	5	32
NIIGATA	180	1373	5	10
TOYAMA	141	*1263	-	14
I SHIKAWA	NR	874	NR	16
FUKUI	38	299	-	*28
YAMANASHI	21	372	-	*14
NAGANO	71	1091	-	10
GIFU	92	1233	-	9
SHIZUOKA	112	1260	-	10
AICHI	119	1466	-	28
MIE	NR	*925	NR	*2
SHIGA	41	546	5	6
KYOTO	43	583	-	9
OSAKA	123	914	-	29
HYOGO	67	565	-	4
NARA	10	252	-	1
WAKAYAMA	115	1324	1	56
TOTTORI	55	380	-	3
SHIMANE	114	1427	13	20
OKAYAMA	NR	*568	NR	15
HIROSHIMA	153	1426	8	98
YAMAGUCHI	51	651	-	1
TOKUSHIMA	107	*1050	-	*32
KAGAWA	58	534	-	8
EHIME	273	2398	1	124
KOCHI	62	846	-	4
FUKUOKA	154	2171	-	*210
SAGA	71	1065	-	9
NAGASAKI	50	846	-	-
KUMAMOTO	67	706	-	18
OITA	NR	420	NR	69
MIYAZAKI	59	*364	-	-
KAGOSHIMA	NR	*667	NR	*3
TOTAL	3862	*46986	74	*1107
Rate				
Current	258.6	262.2	5.0	6.2
Previous	254.2		3.9	

See footnotes at end of table.

WEEKLY SUMMARY REPORT
OF
VENEREAL DISEASES IN JAPAN

WEEK ENDED 20 March 1948

(C) Current Cases

(T) Total cases for year to date

PREFECTURE	CHANCROID		GONORRHEA		SYPHILIS	
	(C)	(T)	(C)	(T)	(C)	(T)
HOKKAIDO	NR	242	NR	2070	NR	1222
AOMORI	17	*141	123	*789	75	*509
IWATE	1	26	18	193	48	299
MIYAGI	NR	118	NR	602	NR	378
AKITA	5	70	117	766	92	728
YAMAGATA	2	*22	37	*251	67	*471
FUKUSHIMA	18	114	101	*730	90	*603
IBARAKI	26	157	126	719	126	726
TOCHIGI	9	132	85	744	115	988
GUMMA	4	*46	52	*530	72	*541
SAITAMA	5	84	39	475	37	438
CHIBA	120	345	512	1643	392	1627
TOKYO	49	585	320	2996	289	4833
KANAGAWA	62	618	303	3085	220	2090
NIIGATA	22	159	82	855	114	853
TOYAMA	6	83	42	637	59	686
ISHIKAWA	NR	124	NR	553	NR	429
FUKUI	6	46	22	335	36	385
YAMANASHI	2	52	14	381	16	257
NAGANO	7	*104	195	2342	142	1690
GIFU	5	127	65	773	31	478
SHIZUOKA	15	151	147	932	153	1109
AICHI	281	1530	715	4286	694	3077
MIE	NR	184	NR	669	NR	778
SHIGA	16	166	37	357	36	385
KYOTO	32	544	139	2211	141	1873
OSAKA	28	587	159	2098	57	2565
HYOGO	71	620	364	2885	561	3787
NARA	15	158	32	462	22	463
WAKAYAMA	34	*276	183	*1103	137	*802
TOTTORI	12	72	43	558	53	443
SHIMANE	2	40	9	278	22	254
OKAYAMA	32	313	128	1259	107	1094
HIROSHIMA	26	364	148	1586	122	1131
YAMAGUCHI	NR	127	NR	942	NR	721
TOKUSHIMA	1	61	21	386	31	374
KAGAWA	6	116	13	262	34	300
EHIME	10	99	60	613	53	596
KOCHI	11	*49	40	*371	21	*252
FUKUOKA	59	736	297	3655	297	2663
SAGA	4	93	88	965	70	681
NAGASAKI	16	195	126	1368	83	*959
KUMAMOTO	8	82	147	938	72	765
OITA	NR	83	NR	711	NR	481
MIYAZAKI	3	*50	52	*450	23	*213
KAGOSHIMA	NR	*46	NR	*782	NR	*600
TOTAL	1048	*10137	5201	*51596	4810	*46597

RATE

Current	70.2	56.6	348.2	287.9	322.1	260.0
Previous	83.2		327.9		352.2	

See footnotes at end of table.

NUMBER OF CASES AND CASE RATES
OF VENEREAL DISEASES IN JAPAN
FOR COMPARABLE PERIODS, 1946, 1947 and 1948

DISEASES	20 Mar 1948	Week Ended		Cumulative Number and Rates for First 10 Weeks		
		22 Mar 1947	23 Mar 1946	1948	1947	1946
<u>Number</u>						
Chancroid	1048	713	458	10137	9681	4301
Gonorrhea	5201	3168	1792	51596	40960	19187
Syphilis	4810	2265	935	46597	27147	10703
<u>Rates</u>						
Chancroid	70.2	47.7	31.7	56.6	53.9	24.8
Gonorrhea	348.2	211.8	124.1	287.9	228.2	110.7
Syphilis	322.1	151.4	64.7	260.0	151.2	61.8

- Note: 1. There were no cases or deaths reported for plague.
2. Rates are the number of cases or deaths per 100,000 population enumerated on 1 October 1947, and are computed on an annual basis.
3. A dash (-) indicates that no cases or deaths were reported and that the case or death rate was zero.
4. A rate of 0.0 indicates that there were some cases or deaths but that the rate was less than 0.1.
5. "NA" indicates data are not available.
6. * Cumulative figures adjusted for delayed and corrected reports.